



Department
of Health

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From Steve Brine MP
Parliamentary Under Secretary of State for Public Health and Primary Care

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05 MAR 2018

Dear Karen,
Thank you for your letter of 31 January to David Lidington and Jeremy Hunt about the closure of the Lincoln Walk-in-Centre (LWC). As the matters you raise relate to the NHS, your letter to David has been passed to the Department of Health and Social Care.

I note your concerns.

As you know, the commissioning of local NHS services is a matter for the local NHS. However, in light of your concerns, Departmental officials have contacted NHS England (NHSE) for further information.

NHSE advises that the Governing Body of Lincolnshire West Clinical Commissioning Group (CCG) met on 24 January to discuss and make a decision on the future of the LWC.

The Governing Body reviewed the evidence in November and decided to continue to support implementation of the transitional plan that would allow the LWC to stay open throughout the winter.

Having received allowances on alternative provision and transitional arrangements, the Governing Body agreed to close the LWC on weekdays from 5 February, and for it to remain open at weekends only until 25 February.

I understand that local actions have been taken to strengthen alternative services.

These include a communication and engagement campaign that focused on the groups within the local population most likely to use the LWC, including students, mothers with young children and foreign nationals, but also extended to the wider community. These communications included organising prescriptions, where to go if a child is ill, pharmacy drop-in facilities, online appointment booking and self-care. In line with the national NHSE direction for urgent service access, NHS 111 assessment and treatment by telephone was promoted as a second route when no core GP is available.

The University Practice, supported by the CCG, targeted students with communication and engagement activity during freshers' week, to encourage them to register with a GP. The practice registered 3,150 additional patients.

Promotion of the alternative services saw a significant reduction in attendance at the LWC. Attendances in the third quarter of 2017/18 were 25 per cent lower than the previous year. Attendances in September dropped 20 per cent, to the lowest monthly attendance for more than two and a half years, in what is usually the LWC's busiest month.

The CCG arranged an additional 90 GP appointments per day across its area from 1 December, and the Governing Body was assured that the number would increase to at least 190 by the end of January.

The CCG's thirty-three GP practices state that they have arrangements in place to support any potential increase in demand. They estimate that not all patients who used the LWC will need a GP appointment under the new arrangements; 70 per cent of people who used the LWC had not checked to see if a GP appointment was available. While the CCG is readying GP provision for maximum impact from the closure of the LWC, this is unlikely to materialise in full.

The CCG has been working with Lincolnshire Community Health Service, which provides the LWC's services, to ensure it has an effective transition plan. This plan handed triage to direct the public to appropriate provision, and providing information about alternative services available.

A&E attendances have been monitored as the numbers attending the LWC have fallen. The CCG advises that there has been no evidence of any adverse impact on A&E since the weekday closure came into force. The CCG has also continued to promote the alternative services in place.



Department of Health

From the beginning of March to mid-April, there will be additional GP out-of-hours provision in place, available through NHS 111, at weekends while the alternative service provision becomes established.

I understand that the CCG liaised with Lincolnshire County Council's Health Overview and Scrutiny Committee (OSC) about the proposed closure of the LWC, most recently during the OSC's meeting on 21 February.

If you have any further concerns on this matter, I would encourage you to raise them with the CCG.

I hope this reply is helpful.



STEVE BRINE

